

**Fill in this information to identify your case:**

United States Bankruptcy Court for the:

DISTRICT OF NEW JERSEY

Case number (if known)

Chapter you are filing under:

☐ Chapter 7

☐ Chapter 11

☐ Chapter 12

☒ Chapter 13

☐ Check if this is an amended filing

## Official Form 101

# Voluntary Petition for Individuals Filing for Bankruptcy

06/24

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

### Part 1: Identify Yourself

#### About Debtor 1:

#### About Debtor 2 (Spouse Only in a Joint Case):

#### 1. Your full name

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

**Duane**

First name

**B**

Middle name

Bring your picture identification to your meeting with the trustee.

**Thomas**

Last name and Suffix (Sr., Jr., II, III)

First name

Middle name

Last name and Suffix (Sr., Jr., II, III)

#### 2. All other names you have used in the last 8 years

Include your married or maiden names and any assumed, trade names and *doing business as* names.

**Duane Thomas**

Do NOT list the name of any separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.

#### 3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)

**xxx-xx-8368**

Debtor 1 **Duane B Thomas**

Case number (if known)

**About Debtor 1:**

**About Debtor 2 (Spouse Only in a Joint Case):**

4. **Your Employer Identification Number (EIN), if any.**

EIN

EIN

5. **Where you live**

**181 Heywood Avenue  
Orange, NJ 07050**

Number, Street, City, State & ZIP Code

**Essex**

County

**If your mailing address is different from the one above, fill it in here.** Note that the court will send any notices to you at this mailing address.

Number, P.O. Box, Street, City, State & ZIP Code

**If Debtor 2 lives at a different address:**

Number, Street, City, State & ZIP Code

County

**If Debtor 2's mailing address is different from yours, fill it in here.** Note that the court will send any notices to this mailing address.

Number, P.O. Box, Street, City, State & ZIP Code

6. **Why you are choosing this district to file for bankruptcy**

*Check one:*

- ☒ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- ☐ I have another reason.  
Explain. (See 28 U.S.C. § 1408.)

*Check one:*

- ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- ☐ I have another reason.  
Explain. (See 28 U.S.C. § 1408.)

Debtor 1 **Duane B Thomas**

Case number (if known)

**Part 2: Tell the Court About Your Bankruptcy Case**

**7. The chapter of the Bankruptcy Code you are choosing to file under** *Check one.* (For a brief description of each, see *Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)*). Also, go to the top of page 1 and check the appropriate box.

- ☐ Chapter 7  
☐ Chapter 11  
☐ Chapter 12  
☒ Chapter 13

**8. How you will pay the fee** ☒ **I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.

☐ **I need to pay the fee in installments.** If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A).

☐ **I request that my fee be waived** (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.

**9. Have you filed for bankruptcy within the last 8 years?** ☒ No.  
☐ Yes.

District _____	When _____	Case number _____
District _____	When _____	Case number _____
District _____	When _____	Case number _____

**10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?** ☒ No.  
☐ Yes.

Debtor _____	Relationship to you _____
District _____	When _____ Case number, if known _____
Debtor _____	Relationship to you _____
District _____	When _____ Case number, if known _____

**11. Do you rent your residence?** ☒ No. Go to line 12.  
☐ Yes. Has your landlord obtained an eviction judgment against you?

- ☐ No. Go to line 12.  
☐ Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it as part of this bankruptcy petition.

Debtor 1 **Duane B Thomas**

Case number (if known)

**Part 3: Report About Any Businesses You Own as a Sole Proprietor****12. Are you a sole proprietor of any full- or part-time business?**☒ No. Go to Part 4.☐ Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

Name of business, if any

Number, Street, City, State &amp; ZIP Code

Check the appropriate box to describe your business:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ None of the above

**13. Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor?**

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

*If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines.* If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

☒ No. I am not filing under Chapter 11.☐ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.☐ Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I do not choose to proceed under Subchapter V of Chapter 11.☐ Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I choose to proceed under Subchapter V of Chapter 11.**Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention****14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?**☒ No.☐ Yes. What is the hazard?

If immediate attention is needed, why is it needed?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

Where is the property?

Number, Street, City, State &amp; Zip Code

Debtor 1 **Duane B Thomas**

Case number (if known)

**Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling**

**15. Tell the court whether you have received a briefing about credit counseling.**

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

**About Debtor 1:**

*You must check one:*

- ☒ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

- ☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ **I am not required to receive a briefing about credit counseling because of:**

- ☐ **Incapacity.**  
I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
- ☐ **Disability.**  
My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
- ☐ **Active duty.**  
I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

**About Debtor 2 (Spouse Only in a Joint Case):**

*You must check one:*

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

- ☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

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If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

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- ☐ **Incapacity.**  
I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
- ☐ **Disability.**  
My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
- ☐ **Active duty.**  
I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 **Duane B Thomas**

Case number (if known)

**Part 6: Answer These Questions for Reporting Purposes**

16. What kind of debts do you have?	16a.	<b>Are your debts primarily consumer debts?</b> <i>Consumer debts</i> are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input type="checkbox"/> No. Go to line 16b. <input checked="" type="checkbox"/> Yes. Go to line 17.
	16b.	<b>Are your debts primarily business debts?</b> <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. <input type="checkbox"/> No. Go to line 16c. <input type="checkbox"/> Yes. Go to line 17.
	16c.	State the type of debts you owe that are not consumer debts or business debts

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17. Are you filing under Chapter 7?	<input checked="" type="checkbox"/> No.  <input type="checkbox"/> Yes.	I am not filing under Chapter 7. Go to line 18.  I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? <input type="checkbox"/> No <input type="checkbox"/> Yes
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18. How many Creditors do you estimate that you owe?	<input checked="" type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999	<input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5001-10,000 <input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> More than 100,000
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19. How much do you estimate your assets to be worth?	<input checked="" type="checkbox"/> \$0 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$500,000 <input type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$1,000,001 - \$10 million <input type="checkbox"/> \$10,000,001 - \$50 million <input type="checkbox"/> \$50,000,001 - \$100 million <input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> \$500,000,001 - \$1 billion <input type="checkbox"/> \$1,000,000,001 - \$10 billion <input type="checkbox"/> \$10,000,000,001 - \$50 billion <input type="checkbox"/> More than \$50 billion
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20. How much do you estimate your liabilities to be?	<input type="checkbox"/> \$0 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input checked="" type="checkbox"/> \$100,001 - \$500,000 <input type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$1,000,001 - \$10 million <input type="checkbox"/> \$10,000,001 - \$50 million <input type="checkbox"/> \$50,000,001 - \$100 million <input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> \$500,000,001 - \$1 billion <input type="checkbox"/> \$1,000,000,001 - \$10 billion <input type="checkbox"/> \$10,000,000,001 - \$50 billion <input type="checkbox"/> More than \$50 billion
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**Part 7: Sign Below****For you**

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Duane B Thomas**Duane B Thomas**

Signature of Debtor 1

\_\_\_\_\_  
Signature of Debtor 2Executed on 6/19/2025

MM / DD / YYYY

Executed on \_\_\_\_\_

MM / DD / YYYY

Debtor 1 **Duane B Thomas**

Case number (if known)

**For your attorney, if you are represented by one**

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

**If you are not represented by an attorney, you do not need to file this page.**

**/s/ HERBERT B. RAYMOND, ESQ.**

Date

**6/19/2025**

Signature of Attorney for Debtor

MM / DD / YYYY

**HERBERT B. RAYMOND, ESQ. HR#1379**

Printed name

**HERBERT B. RAYMOND, ESQ.**

Firm name

**7 GLENWOOD AVENUE  
SUITE 408  
EAST ORANGE, NJ 07017**

Number, Street, City, State & ZIP Code

Contact phone **973-675-5622**

Email address

**HERBERTRAYMOND@GMAIL.COM**

**HR#1379 NJ**

Bar number & State

Sydney Lawrence  
617 Seven Oaks Drive  
Orange, NJ 07050

Chase Bank  
PO Box 15369  
Wilmington, DE 19850

EdFinancial Services  
Attn: Bankruptcy  
PO Box 36008  
Knoxville, TN 37930

Ally Credit Card/ CWS  
PO Box 9222  
Old Bethpage, NY 11804

Chase Bank  
PO Box 901038  
Fort Worth, TX 76101

Fay Servicing  
PO Box 619063  
Dallas, TX 75261

Ally Financial  
Attn: Bankruptcy  
PO Box 380901  
Bloomington, MN 55438

Chase Bank  
PO Box 901060  
Fort Worth, TX 76101

Fay Servicing  
PO Box 809441  
Chicago, IL 60680

Althea Smith-Thomas aka Tia Thomas  
181 Heywood Avenue  
Orange, NJ 07050

Cherelle C Tolor, ESQ  
28 Sherman Place  
Irvington, NJ 07111

Fay Servicing  
425 S. Financial Place  
20th Floor  
Chicago, IL 60605

Althea Smith-Thomas aka Tia Thomas  
181 Heywood Avenue  
Orange, NJ 07050

Cherelle C Tolor, ESQ  
414 Centre Street  
2nd Floor  
Nutley, NJ 07110

Fay Servicing  
425 S. Financial Place  
20th Floor  
Chicago, IL 60605

Althea Smith-Thomas aka Tia Thomas  
181 Heywood Avenue  
Orange, NJ 07050

Citibank  
Attn: Bankruptcy Department  
P.O.Box 6500  
Sioux Falls, SD 57117

Fay Servicing Company  
901 S 2nd Street  
Suite 201  
Springfield, IL 62704

Althea Smith-Thomas aka Tia Thomas  
181 Heywood Avenue  
Orange, NJ 07050

Citibank  
PO Box 6181  
Sioux Falls, SD 57117

Fay Servicing LLC  
425 S. Financial Place  
20th Floor  
Chicago, IL 60605

Bridgecrest Acceptance Corporation  
PO Box 53087  
Suite 100  
Phoenix, AZ 85072

CWS / CW Nexus  
101 Crossway Park Drive W  
Woodbury, NY 11797

Fay Servicing LLC  
939 W North Avenue  
Suite 680  
Chicago, IL 60642

Bridgecrest Acceptance Corporation  
PO Box 29018  
Phoenix, AZ 85038

EdFinancial Services  
PO Box 36008  
Knoxville, TN 37930

First Premier Bank  
3820 N Louise Avenue  
Sioux Falls, SD 57107

Chase Bank  
MailCode LA4-7100  
700 Kansas Lane  
Monroe, LA 71203

Edfinancial Services  
120 N Seven Oaks Drive  
Knoxville, TN 37922

First Premier Bank  
900 West Delaware  
PO Box 5519  
Sioux Falls, SD 57117



First Premier Bank  
Attn: Correspondence Department  
PO Box 5525  
Sioux Falls, SD 57117

Internal Revenue Service  
PO Box 57  
Bensalem, PA 19020

Mission Lane LLC  
PO Box 105286  
Atlanta, GA 30348

Genesis FS Card Services  
Attn: Bankruptcy  
PO Box 4477  
Beaverton, OR 97076

Internal Revenue Service  
Philadelphia, PA 19255-0010

Sharon Lawrence and Sydney Law  
617 Seven Oaks Drive  
Orange, NJ 07050

Genesis FS Card Services  
PO Box 4499  
Beaverton, OR 97076

IRS  
PO Box 9019  
Holtsville, NY 11742

Sharon Lawrence and Sydney Law  
15 Brook Place  
West Orange, NJ 07052

GM Financial  
PO Box 183834  
Arlington, TX 76096

IRS  
PO Box 219236  
Kansas City, MO 64121

State of New Jersey  
Division of Taxation  
50 Barrack Street, P.O. Box 269  
Trenton, NJ 08646

GM Financial  
PO Box 99605  
Arlington, TX 76096

IRS  
955 S Springfield Avenue  
Building A  
Springfield, NJ 07081

State of New Jersey  
Division of Taxation  
Bankruptcy Section  
PO Box 245  
Trenton, NJ 08646-0245

GM Financial  
PO Box 182963  
Arlington, TX 76096

IRS  
PO Box 9019  
Holtsville, NY 11742

State of New Jersey  
Division of Taxation  
PO Box 046  
Trenton, NJ 08646-0046

Goldman Sachs Bank  
PO Box 45400  
Salt Lake City, UT 84145

KML Law Group  
701 Market Street  
Suite 5000  
Philadelphia, PA 19106

State of New Jersey  
Division of Revenue  
PO Box 262  
Trenton, NJ 08464-0262

Goldman Sachs Bank USA  
Attn: Bankruptcy  
PO Box 70379  
Philadelphia, PA 19176

KML Law Group PC  
216 Hadden Avenue  
Suite 406  
Westmont, NJ 08108

State of New Jersey  
Division of Revenue  
PO Box 417  
Trenton, NJ 08646

Goldman Sachs Bank USA  
Attn: Bankruptcy  
PO Box 70321  
Philadelphia, PA 19176

Mission Lane  
PO Box 4517  
Carol Stream, IL 60197

Synchrony Bank  
PO Box 965013  
Orlando, FL 32896

Internal Revenue Service  
PO Box 7346  
Philadelphia, PA 19114

Mission Lane LLC  
Attn: Bankruptcy  
P.O. Box 105286  
Atlanta, GA 30348

Synchrony Bank  
PO Box 71757  
Philadelphia, PA 19176

Upgrade Inc  
275 Battery Sreet Floor 23  
San Francisco, CA 94111

Uplift, Inc.  
Attn: Bankruptcy  
440 N Wolfe Road  
Sunnyvale, CA 94085

Upgrade, Inc.  
Attn: Bankruptcy  
275 Battery Street 23rd Floor  
San Francisco, CA 94111

Upgrade, Inc.  
Attn: Bankruptcy  
275 Battery Street 23rd Floor  
San Francisco, CA 94111

Upgrade, Inc.  
2 North Central Ave, 10th Floor  
Phoenix, AZ 85004

Upgrade, Inc.  
2 North Central Avenue, 10th Floor  
Phoenix, AZ 85004

Upgrade, Inc.  
275 Battery Street  
23rd Floor  
San Francisco, CA 94111

Upgrade, Inc.  
2 North Central Ave, 10th Floor  
Phoenix, AZ 85004

Uplift  
Attn: Bankruptcy  
275 Battery Street, Suite 2300  
San Francisco, CA 94111

Uplift  
440 N Wolfe Road  
Sunnyvale, CA 94085